

Beneficiary Designation / Change: Pre-Retirement Death Benefit

Carpenters Pension Trust Fund of St. Louis

1419 Hampton Avenue, St. Louis, MO 63139

Phone: (314) 644-4802 | Toll-Free: (877) 232-3863 | Fax: (314) 678-1110 | Email: pension@laborfunds.org



Carpenters' Plan

Shops' Appendix

Name of Participant

Social Security Number

Street Address

City

State

Zip

INSTRUCTIONS: This form is for use only by unmarried Participants or Participants who are currently married for a period of less than one (1) year. Use this form if you have not previously designated a beneficiary to receive any Pre-Retirement Death Benefit that may become payable from the Pension Plan in the event of your death before you begin to receive a pension, or if you wish to change a beneficiary you have previously designated to receive that benefit.

The Pre-Retirement Death Benefit for a Participant who dies while married to an Eligible Spouse is in all cases payable to the surviving spouse, and no other beneficiary designation can be made.

PARTICIPANT'S STATEMENT: I, _____, certify that I am not currently married and hereby designate the beneficiary or beneficiaries named below to receive any Pre-Retirement Death Benefit that may become payable from the Pension Plan, revoking any previous beneficiary designation I may have made with respect to the Pre-Retirement Death Benefit.

_____ Beneficiary Name	_____ Relationship	<input type="checkbox"/> Primary <input type="checkbox"/> Secondary
_____ Address	_____ Social Security Number	
_____ City, State, Zip Code	_____ Date of Birth	

_____ Beneficiary Name	_____ Relationship	<input type="checkbox"/> Primary <input type="checkbox"/> Secondary
_____ Address	_____ Social Security Number	
_____ City, State, Zip Code	_____ Date of Birth	

Participant Signature

Date

Please return this completed form to Retirement Services at the address listed above.